

GOVERNMENT OF GUAM DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES DIVISION OF ENVIRONMENTAL HEALTH			BARBER AND BEAUTY SHOPS, SCHOOLS, AND THE PRACTICE OF BARBERING AND COSMETOLOGY INSPECTION REPORT PAGE 1 OF 1		
INSPECTION	GRADE	Inspection Date	ESTABLISHMENT NAME:		
Regular <input checked="" type="checkbox"/>	4/A	09/27/2018	THE LEO PALACE SPA		
Follow-Up <input type="checkbox"/>		Time In/Out:	OWNER/OPERATOR:		
Complaint <input type="checkbox"/>		1312 / 1455	LEO PALACE GUAM CORPORATION		
Investigation <input type="checkbox"/>		Sanitary Permit:	LOCATION: TRACT 2511 LEO PALACE		
Other(Specify Below)		No.: 180001969	MANENGGON HILLS, YONA		
		Exp.: 02/30/2019	ESTABLISHMENT TYPE: BEAUTY SALON		
The following items identify violations found this day in the operations and facilities which must be corrected by the next inspection, or sooner as the Department indicates. Non-compliance may result in downgrading or permit suspension. To appeal, a written hearing request must be submitted before the indicated correction date.					
ITEM NO.*	REMARKS				DEMERITS
	A REGULAR INSPECTION WAS CONDUCTED TODAY. THE FOLLOWINGS WERE OBSERVED:				
8.	PUMICE STONE AND FOOT SCRUB WERE FOUND IN PEDICURE ROOM. AS PER PERSON-IN-CHARGE (PIC), THE SAID EQUIPMENT WERE USED ON MULTIPLE CUSTOMERS. * CORRECTIVE ACTION: PIC DISPOSED THE PUMICE STONE AND FOOT SCRUB.				COS
	THE USE OF PUMICE STONE, FOOT SCRUB, OR ITEMS THAT ARE ^{NOT} SINGLE-USE SHALL BE PROHIBITED TO PREVENT THE SPREAD OF DISEASES.				
19	STANDARD MEASURING CUP FOR SANITIZING SOLUTION WAS NOT USED PROPERLY.				2
	STANDARD MEASURING CUPS FOR SANITIZING SOLUTION SHALL BE USED PROPERLY TO FACILITATE WITH THE PROPER SANITIZING OF EQUIPMENT AND UTENSILS.				
44.	PREVIOUS INSPECTION REPORT NOT POSTED.				2
	INSPECTION REPORT SHALL BE POSTED AS REQUIRED AS PER THE RULES AND REGULATIONS PERTAINING TO BARBER AND BEAUTY SHOPS, SCHOOLS; AND THE PRACTICE OF BARBERING AND COSMETOLOGY.				
	PHOTOS WERE TAKEN.				
	REMOVED PLACARD NO. 01205 "A". ISSUED AND POSTED				
	PLACARD "A" NO. 02767 OFF ON THE SHELF OF RECEPTION AREA.				
	DISCUSSED THIS REPORT WITH LUALHATI REYES, COSMETOLOGIST.				
I HAVE READ AND UNDERSTAND THE ABOVE VIOLATION(S) AND I AM AWARE OF THE CORRECTIVE MEASURES TO BE TAKEN.					
*When any of the following items are cited above, they shall be corrected within ten (10) days of this inspection: (1), (2), (3), (7), (8), (17), (22), (24), (31), (43), and (45).			RECEIVED BY (Name & Title): Lualhati Reyes <i>(Signature)</i> (Cosmetologist) DEH INSPECTOR (Name & Title): V. RAYMUNDO, EPHD <i>(Signature)</i> 300-9570		
GEH-07 Rev: 10/98			WHITE COPY - Office YELLOW COPY - Establishment		